

**Home Visiting Task Force Meeting
November 5, 2013**

MEETING MINUTES

Attendees: Angela Bailey, Nancie Brown, Stephanie Burkhardt, Jeanna Capito, Deborah Daro, Andrea Densham, Nicole Feliciano, Melanie Garrett, Gaylord Gieseke (co-chair), Lisa Gonzalez, Cortnae Gullatt, Roy Harley, Liz Heneks, April Ingram, Lesley Janes, Colleen Jones, Kathy Kern, Teresa Kelly, Kathleen Kurtz, Bahakia Madison, Beth Masciti-Miller, Mattie McClaurin, John McDonald, Susan Monroe, Kim Nelson, Greg O'Donnell, Andrea Palmer, Anna Potere, Sally Puleo, Nancy Radner, Diana Rauner (co-chair), Debbie Reynolds, Terri Rogers, Liliana Romero, Amy Schroeder, Lesley Schwartz, Diane Scruggs, Ana Maria Serrano, Christy Serrano, Glendean Sisk, Penny Smith, Sheryl Stoller, Joanna Su, Sue Swisher, Vikki Thompson, Mark Valentine, Jacob Vigil, Whitney Walsh, Janelle Weldin-Frisch, Granada Williams, Jay Young, Kim Zalent

Welcome and Introductions

- April 23, 2013 meeting minutes were passed with no changes.

State and Federal Updates

- State Budget: The temporary income tax increase expires in January 2015, which means the state will lose \$2.3B in revenue. If the legislature doesn't act to raise revenue (whether through a continuation of the temporary tax increase or some other mechanism), then they would have to cut spending. Governor Quinn will have to present a budget that reflects the loss of revenue in the new year. This is a major concern for all social services programs and programs funded by the state budget, and advocacy organizations are accordingly focused on this.
- Federal Updates:
 - The federal government could not come to an agreement on the FY14 budget before the start of the fiscal year, so the government shut down temporarily in October. The shutdown ended when the government passed a continuing resolution to fund the government through January 15, 2014, at current funding levels. The sequester will stay in place.
 - The House and Senate have appointed conferees to negotiate a budget agreement by Friday, December 13. The conferees began their meetings on October 30th. There are currently two sign-on letters being circulated from Illinois to the conference committee: one from business leaders, and the other from members of the General Assembly. If you have any contacts or connections to participate, please let us know and we can distribute it to you.
 - On September 30, President Obama listed early childhood education first of several budget items he would like to negotiate with Congressional Republicans and Democrats. On Thursday October 3rd, he publicly reiterated his commitment to early childhood education and Head Start as part of a budget and economic package. We understand he has communicated this priority privately to Republican Congressional leaders as well. The best hope is that in the budget negotiations, there may be an opportunity for some investment in early childhood and potentially relief from the sequester. We appreciate any efforts done on media hits/letters to the editor, etc. that are presented to the White House.
 - Also, the federal debt limit will be raised through February 7, 2014, avoiding a default.

- On November 1st, the increase in SNAP benefits that was authorized through the 2009 American Recovery Act ended. The cut will be substantial and will impact millions of children and families. House and Senate members who are now beginning to negotiate a final Farm Bill should keep this benefit cut in mind as they consider, in reauthorizing the SNAP program, whether to make even deeper cuts.

MIECHV Updates

- *Note: see handout for additional information.*
- Continuing to work with pilot agencies and communities as well as voluntary communities: Peoria, McLean, and Stephenson Counties. Please contact Teresa, Andrea, Lesley, Jay, or Joanna if you are interested in being a voluntary community.
- Trainings sponsored by MIECHV are now open to all home visitors.
- DHS facilitated training on Collective Impact with Paul Born. Representatives from the MIECHV communities as well as Innovation Zones and Project Launch participated in conversations around how Illinois could implement CI in its communities to effect systems change. Paul Born was impressed with Illinois and is recommending that Aspen Institute provide us with free technical assistance to work on collective impact, which Joanna is coordinating.
- CPRD is working with a team at each agency to develop their own CQI action plan. Agencies have a wide range of experience and infrastructure for CQI. The first topic area is looking at to what degree referrals are being made by home visitors to outside services and whether there is follow up. Illinois' CQI plan continues to gain national attention.
- Lessons learned so far:
 - Pilot and voluntary communities are working extremely hard. MIECHV has been a very difficult grant to implement and oversee because there are so many working parts.
 - We need to define the continuum of home visiting services in Illinois and how to match families with that. In early 2014 there should be a definition ready, or at least a framework by which communities can determine what system works best for them.
 - Some of the components implemented in MIECHV are especially important, e.g. coordinated intake, IMH consultation, and community systems development.
 - We need more collective impact in order to re-create the system to implement MIECHV and sustain home visiting. This is especially important in light of the funding situation.
 - For coordinated intake to work, all funders have to be invested in it and have common language that says every funder supports and expects that their programs will participate in it.

Home Visiting Research Update

- The Home Visiting Task Force (HVTF) Executive Committee decided at its July 9th meeting that the best way to ensure that we support the highest quality research is by convening a panel of expert researchers to evaluate and prioritize research opportunities solicited from the field.
- Proposals were solicited from the entire Home Visiting Task Force, and we received four proposals. The panel of expert researchers, chaired by Deborah Daro, reviewed the proposals. The panel presented its recommendations to the Executive Committee at its September 30th meeting that 3 proposals go forward for consideration for the application to HRSA. Topics focused on quality of home visiting programs; the role of fathers and engaging them more effectively; and extending data collection of the doula RCT to 24 months to see sustained impacts of programs.
- The Executive Committee accepted these recommendations and is moving forward with submitting the application to HRSA.

Home Visiting White Paper

- This process represents the latest step in the movement towards a unified system for home visiting in Illinois, transcending funding streams, models, etc.
- The recommendations are derived from thoughts, comments, and suggestions from the home visiting workforce that attended summits last year. They are divided into 3 major categories: program, policy and funding, and professional development.
- It was recommended that the Home Visiting Task Force adopt the recommendations and determine where some of this work is already happening, and where we have systems in place that can help to distribute them. It was also recommended that these recommendations go through the Early Learning Council, to be discussed at the next full HVTF meeting in February.

Update from Rockford MIECHV Community

- *Note: see PowerPoint presentation for additional information.*
- MIECHV helped the 4 partner agencies come together, and has really strengthened partnerships by developing a common agenda. Even if MIECHV funding ended, they would continue the collaboration.
- Has helped to bring non-MIECHV cases up to caseload.
- Added questions to the coordinated intake screening tool to make the referral stronger, e.g. about income and father of the baby.
- Began to request alternative method for contacting clients because contact information changes quickly between intake and the referral being completed.
- Another huge benefit is increased opportunity for professional development and trainings, e.g. for the coordinated intake worker so that she can make a strong referral, e.g. understanding local programs better.
- Strategies for community engagement:
 - Have had a few press events and publicity in local newspapers.
 - Have a collective impact group in the area (Alignment Rockford and Healthy Starts Committee) to support all 0-5 programs.
 - Developed a “Talk to Me” program based off need to develop secure attachment for babies 0-12 months.
- They want to increase coordination with FCM, BBO, and subsequent pregnancy programs through DHS. They are hoping for guidance to come out of discussions to make sure clients are served best.
- For families on the waitlist, they are looking for alternative ways to engage them while they are waiting, e.g. parent-child interaction groups. Keeping them engaged has been a huge issue. In the interim, most families are already part of WIC and/or Case Management, but they are trying to make sure they are all involved in those services. Even if there is a waitlist, agencies will get in families that are at highest risk.
- Key to success has been spirit of collaboration, i.e. not protecting individual programs.

Wrap Up and Next Steps

- Our next meeting is February 4th, 2014. The full 2014 meeting schedule is one of your handouts.